



P.O. Box 5100, Goodyear, AZ 85338
(623) 882-7808 FAX: (623) 932-6519
Web address: www.goodyearaz.gov

Community Funding Program Application Form FY 06-07

Basic Information

Name of Organization: _____

TAX ID #: _____

Name and title of responsible administrator: _____

Street, City, and Zip Code: _____

Phone number: _____

FAX number: _____

E-mail address: _____

Give a brief description of your organization, the service it provides, and who is served by the program. **Include how many Goodyear residents are served** and how you have used funds historically for the good of the community. (Limit to 150 words)

A. Program Information —Section A requires specific, clearly stated information. Be as detailed as possible. Use a 12-point font, double-spaced and no more than four pages to address the following eight questions. (80 points)

1. What is the dollar amount of your funding request?
2. What need will your project address?
3. How does your organization plan to address this need? Please state your goals, objectives, and tasks within a time frame you project to accomplish the work needed to address your stated need.
4. What outcome(s) do you seek to accomplish within the next year with City of Goodyear funding? What will be your success measures?
5. How many Goodyear residents do you seek to serve? How many total people do you estimate you will serve in the Southwest Valley?
6. Will you work with other organizations to achieve your outcome(s)? Why or why not?
7. What other sources of funds, if any, have you requested to assist in meeting your need?
8. What success have you demonstrated in the past, with the City of Goodyear or with other organizations that indicate you will have success with this project? For example:
 - Have you decreased the drop out rate for high school students?
 - Describe how the project was successful in the past
 - What impact did it have on the community?
 - Did you teach new skills to the clients you served?(Examples of success measure examples are for illustration purposes only.)

- B. Provide no more than a two-page (2) income/expense budget sheet describing the costs associated with this program and your sources of revenue and expenditures (use attached form). (10 points)***
- C. A balanced application process leaves some room for an evaluation committee to consider the intangible elements that make an organization successful. In a couple of paragraphs, tell us why your group should be selected. (10 points)***

GOODYEAR COMMUNITY FUNDING

| Revenues | Current Year (05/06) | Previous Year (04/05) |
|----------------------------|-------------------------|--------------------------|
| 1. City of Goodyear | <input type="text"/> | <input type="text"/> |
| 2. Grants | <input type="text"/> | <input type="text"/> |
| 3. Fees | <input type="text"/> | <input type="text"/> |
| 4. Donations | <input type="text"/> | <input type="text"/> |
| 5. Others (Please Specify) | <input type="text"/> | <input type="text"/> |
| Totals: | <input type="text"/> | <input type="text"/> |

Expenditures

| Category | *City of Goodyear | Total for your Organization |
|------------------------------------|----------------------|--------------------------------|
| Personnel Services | <input type="text"/> | <input type="text"/> |
| Materials and Supplies | <input type="text"/> | <input type="text"/> |
| Professional and Contract Services | <input type="text"/> | <input type="text"/> |
| Debt Service | <input type="text"/> | <input type="text"/> |
| New and Replacement Equipment | <input type="text"/> | <input type="text"/> |
| Capital Improvement Projects | <input type="text"/> | <input type="text"/> |
| Others (Please Specify): | | |
| 1. | <input type="text"/> | <input type="text"/> |
| 2. | <input type="text"/> | <input type="text"/> |
| 3. | <input type="text"/> | <input type="text"/> |
| 4. | <input type="text"/> | <input type="text"/> |
| Totals: | <input type="text"/> | <input type="text"/> |

*Represents how the funding provided by the City of Goodyear to your organization was spent by expense category and in relation to total expenditures for your organization for the fiscal year.

Previous City of Goodyear Community Funding (If Applicable)

| Budget Year | Amount Requested | Amount Funded |
|------------------------|-----------------------------|--------------------------|
| 2001 | | |
| 2002 | | |
| 2003 | | |
| 2004 | | |
| 2005 | | |
| | | |